

This Form is for INTERNAL PTO USE ONLY
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NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: _____

Total Fee Calculation

| Fee Code | Total # Claims | Number Fees | X | Fee | Fee | Total |
|------------------------------|-------------------|----------------|---|-------------|-------------|-------|
| Small | | | | Small Entry | Large Entry | |
| Basic Filing Fee | 291.101 | 27 | 7 | _____ | 690 | _____ |
| Total Claims > 30 | 291.101 | 20 | X | _____ | 126 | _____ |
| Independent Claims > 5 | 292.102 | 4 | X | _____ | 78 | _____ |
| Multi-Dep Claim Present | 294.104 | | | _____ | | _____ |
| Surcharge | 295.111 | | | _____ | 130 | _____ |
| English Translation | 119 | | | _____ | | _____ |
| <u>TOTAL FEE CALCULATION</u> | | | | | | |

Fees due upon filing the application

Total Filing Fees Due = \$ 1024

Less Filing Fees Submitted = \$ _____

BALANCE DUE = \$ 1024

WSP

Office of Initial Patent Examination

Figure 7